## Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	02/26/08	Address:	27 Jefferson Ave.
Case #:	<u>16F17866</u>		Peru, Indiana 46970
County:	<u>Miami</u>		
Type of La	aboratory Scizure (check one)	Seizure Location (	check all that apply)
Chemic	onal Lab al/Glassware/Equipment (only) ite (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open - No Structure ☐ Other:
(check all the Lithium   Lithium   Red Photo   Flamma   Water F   Anhydre   Hydroc   Corrosi   Corrosi	nd: Location (bedroom, kitchen, open at apply)  n/Ammonia Reaction(s):  osphorous/lodine Reaction(s):  able Solvents: kithcen  Reactive Metal (Lithium):  ous Ammonia:  bloric Acid Gas Generator(s):  ve Acid: kitchen  ve Base:  tem and location):	<del></del>	
☐ Yes 0 ☐ No *If yes, fax re	er age 18 discovered (check one) (number present)  eport to Child Protective Services  t is to be faxed to the following age	☐ Ephedrin☐ Retail/M☐ Other;	e Information c/Pseudoephedrine Tracking Log erchant Tip ccation:
Fire Depart	ment: Peru F.D.	Fax: <u>765-4</u>	
Health Department: Miami County		Fax: <u>765-4</u> Fax:	
Child Prote	ection Service: <u>N/A</u>	1 ax	-
For further information regarding this methamphetamine laboratory, contact Investigating Officer: R.A. Burgess Phone 765-473-6666			

<sup>\*\*</sup> This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

<sup>\*\*\*</sup> This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.